FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

P95000062863 (2)

BENEFITS, INC.

FILED Mar 05 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				
130 UNIVERSITY PARK DRIVE #210 130 UNIVERSITY PARK DRIVE #210				
WINTER PARK FL 32972 WINTER PARK FL 32972				DO NOT WRITE IN THIS SPACE
				3. Date incorporated or Qualified
				08/14/1995
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied For
21 120	University Pork Dr		4669	59-3335809 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		S8 75 Additional
22 # 2		27		5. Certificate of Status Desired Fee Required
City & Stati		City & State		6. Election Campaign Financing \$5.00 May Be
23 U)IN:	ter Park, Flaida	28 Winter Par	K FLORI	Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	This corporation awas or has paid the oursest year Intensible.
24 327	92 25 USA	29 <i>32793</i> 3		Personal Property Tax due June 30. Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
PALAHACH, MICHAEL ESQ 81 Name				
3929 PONCE DE LEON BLVD. 82 Street Address (P.O. Box Number is Not Acceptable)				
CORAL GABLES FL 33134				Address (F.O. Box (Volition is 190) Acceptable)
83				
			84 City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered				
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am tamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.				
SIGNATURE Signature, typed or printed name of registered agent and tille if applicable (NOTE: Registered Agent signature required when reinstating) DATE DATE				
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	Б	DELETE	1.1 TITLE	⊅ Change ☐ Addition
NAME	STEINBERG, BARBARA		1.2 NAME	STEINBELG RADDADA
STREET ADDRESS	130 UNIVERSITY PARK DRIVE	# 210	1.3 STREET ADDRESS	STEINBELG BARBARA 120 UNIVERSITY PARK DEIVE 230
CITY-ST-ZIP	WINTER PARK FL 32972		1.4 CITY-ST-ZIP	William DARK G 32792
THLE	D	DELETE	2.1 TITLE	Change Addition
NAME	STEINBERG, ED		2.2 NAME	
STREET ADDRESS	130 UNIVERSITY PARK DRIVE	621 0	2.3 STREET ADDRESS	STEINBERG, ED 120 UNIVERSITY PARK DELVE #230
	WINTER PARK FL 32972	FEIV		WINTER TAKEN, FZ 32792
CITY-ST-ZIP TITLE	THE COLOR	DELETE	2.4 CITY-ST-ZiP 3.1 TITLE	Change Addition
ł				Vitality //Utility
NAME			3.2 NAME	
STREET ADORESS			3.3 STREET ADDRESS	
CITY-ST-ZIP		Decemen	3.4. CITY-ST-ZIP	Change Addition
TITLE		☐ DELETE	. 4.1 TITLE	L_J Change L_I Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	
TITLE		DELETE	5.1 TITLE	L. Change L. Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY - ST - ZIP	
TITLE		☐ DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			63 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY+ST-ZIP	

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation in the receiption trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607 and the receiption of the corporation of the cor

CIONATURE.

ED STEINBERG 2/27/98 407/1057-D697